

Received & Inspected

JUN 2 6 2015

FCC Mail Room

REDACTED- FOR PUBLIC INSPECTION

June 24, 2015

VIA OVERNIGHT DELIVERY

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, S.W. Washington, DC 20554

RE:

Confidential Financial Information Subject to Protective Order in WC Docket Nos. 10-90, 07-135, 05-337, 03-109, CC Docket Nos. 01-92, 96-45, GN Docket No. 09-51, WT Docket No. 10-208, Before the Federal Communications Commission

Dear Ms. Dortch:

Mountain View Telephone Company, a privately-held rate of return carrier receiving high cost support, has electronically submitted FCC Form 481 to the Commission with redacted financial data, in compliance with 47 C.F.R. §§ 54.313 and 54.422

As specified in the Protective Order issued on November 16, 2012 by the Commission, two copies of the redacted confidential information are being filed simultaneously with the non-redacted confidential information. The redacted information for this filing and each page of the file where confidential information has been omitted is marked "REDACTED - FOR PUBLIC INSPECTION"

Please feel free to contact me with any questions regarding this particular matter.

Sara Zimmerman

President

Enclosures

cc Mr. Charles Tyler, FCC Telecommunications Access Policy Division State Regulatory Agency HERE

FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		PCC Form 481 OMB Control No. 3060-0985/GMS Control No. 8060-0819 July 2013
<010>	Study Area Code	401712	Boschust & S
<015>	Study Area Name	MOUNTAIN VIEW TEL CO	Received & Inspected
<020>	Program Year	2016	
<030>	Contact Name: Person USAC should contact with questions about this data	Leslie Dewey	JUN 2 6 2015
<035>	Contact Telephone Number: Number of the person identified in data line <030>	8704253100 ext.	FCC Mail Room
<039>	Contact Email Address: Email of the person identified in data line <030>	leslie.dewey@yelcot.com	
ANNUA	AL REPORTING FOR ALL CARRIERS		54.313 54.422 Completion Required Required (check box when complete)
<100>	Service Quality Improvement Reporting	(complete attached v	1 1000000
<200>	Outage Reporting (voice)	(complete attached a	vorksheet)
<210>		outages to report	1888
<300>	Unfulfilled Service Requests (volce) 0		
<310>	Detail on Attempts (voice)		(attoch descriptive document)
	<u></u>		
<320>	Unfulfilled Service Requests (broadband)		
<330>	Detail on Attempts (broadband)		(ottach descriptive document)
<400>	Number of Complaints per 1,000 customers (voice)		
<410>	Fixed 0.0		
<420>	Mobile 0.0		
<430>	Number of Complaints per 1,000 customers (broad)	pand)	1 18111 V
<440> <450>	Fixed 0.0 Mobile 0.0		
<500>	Service Quality Standards & Consumer Protection R	ules Compliance (check to indicate co	rt(fication)
<510>		(ottoched descrip	tive document)
<600>	Functionality in Emergency Situations	(check to indicate or	rtification)
	MVTC_401712er610.pdf	ł	
		fattached descriptive	document)
<610>			
<700>	Company Price Offerings (voice)	(complete ettoched	worksheet)
	Company Price Offerings (broadband)	(complete attoched	- dalais
<800>	Operating Companies and Affiliates	(complete attached	worksheer)
	Tribal Land Offerings (Y/N)?	(If yes, complete attached	worksheet)
<1000>	Voice Services Rate Comparability Certification	Yes	A 1/2 5 1/2 1/2 1/2
	401712ar1010.pdf		
<1010>		(attach descriptive	socument)
<1100>	Certify whether terrestrial backhaul options exist (Y	es or No) (If not, check to ind	icate certification)
<1110>		(complete attached	
	Terms and Condition for Lifeline Customers	(complete attached	worksheet)
	Price Cap Carriers, Proceed to Price Cap Additional I		
<2000>	Including Rate-of-Return Carriers offiliated with Pri	ce Cap Local Exchange Carriers (check to indicate ce	rtification)
<2005>		(complete attached v	
	Rate of Return Carriers, Proceed to ROR Additional		
<3000> <3005>	(a)	(check to indicate ce (complete attached v	

11 TO 10 TO	rvice Quality Improvement Reporting Election Form	PCC Form 481 OMB Control No. 3050-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Devey
:035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ent.
039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yelcot.com
(110>	Has your company received its ETC certification from the PCC? If your answer to Line <1.10> is yes, do you have an existing \$54.202(a) "5	(yes / no)
<111>	year plan" filed with the FCC?	(yes/no) O
<112>	report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your concern continuous progress report is only required to address voice telephony service.	401712ac112.pdf
	Please select the appropriate responses below (Yes, No, Not Applicable) to confirm	
	that the attached document(s), on line 112, contains a progress report on its five-y service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire conter level or cansus block as appropriate.	* APP 60
113>	service quality improvement plan pursuant to §54.202(a). The information shall be	* APP 60
	service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire conter level or cansus block as appropriate.	
114>	service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire conter level or census block as appropriate. Maps detailing progress towards meeting plan targets. Report how much universal service (USF) support was received	Yes Yes
114>	service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire conter level or census block as appropriate. Maps detailing progress towards meeting plan targets. Report how much universal service (USF) support was received. How much (USF) was used to improve service quality and how support was used to improve	Yes Yes Yes
:113> :114> :115> :116> :117>	service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire conter level or census block as appropriate. Maps detailing progress towards meeting plan targets. Report how much universal service (USF) support was received	Yes Yas e service quality Yes yes service coverage Yas

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0985/OMB Control No. 3060-0819
Particular Control Con	July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	NO 13T WEIV WEATHDOOK
4020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lesiae Devey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lesite.dewey@yelcot.com

	4>	 41>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	«c)»	«d»	<0>	4>	- P	<h></h>
R	NORS teference lumber	Clutage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Fecilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Proventative Procedures
E												
H												
E												
H	-								1			
H												
F												
E												
⊦			-									
⊢	-	_							+-			
⊢		_							1			

	te Offerings in lection Form	cluding Voice Rate (Deta			3 8 9		CC Form 481 MB Control No. 3060-0986/CA dy 2013	(S Control No. 3060-0819
010>	Study Area Co	de			401712				
	Study Area No				HOUNTAIN V	TEN TEL CO			
020>	Program Year				2016			· · · · · · · · · · · · · · · · · · ·	
030>	Contact Name	- Person USAC should	contact regardi	ng this date	Legal to Day	47			
035>	Contact Telep	hane Number - Numb	er of person ider	ntified in data line	<030> 8704253100	ext.			
039>	Contact Email	Address - Email Addre	ess of person ide	ntified in data line	<030> lesite.des	ey@yelcot.com			
	Single State w	cal Service Charge Effi fide Residential Local S	Service Charge	15	. /2015				
703>	<ab></ab>	45>	cab>	фb	442	<93>	de	<bs></bs> d5>	- ~
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mendetory Extended Area Service Charge	Total per line Rates and F
					- See a	tached worksheet			
	1								-
			-						

	adband Price Offerings lection Form	ra was s			:		PCC Form GMB Cost July 2013	trol No. 3060-0986/	DMS Control No. 2060-0819
4010>	Study Area Code			401712					
4015>	Study Area Name			HOUNTAIN VIEW TEL	co				
40200	Program Year			2016					
4300	Contact Name - Person	USAC should contact regarding t	this data	Lestie Dewey					
435>	Contact Telephone Num	nber - Number of person identifi	ed in data fine <030>	8704253100 ext.					
<039>	Contact Emel Address -	Email Address of person identif	led in data line <030>	leelie.dewey\$yeld	ot.com				
<711>	- db	qb .	41>	42	40	ৰা >	- 40 >	40>	adho
				State Seculated		Broadband Service -	Parad Seeds	Heart Alleman	Usage Allewance

_	q1>	- db	41>	42>	40	<u>ৰাচ</u>	(d2)	4(1)>	co/o
L	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Dewnload Speed (Mbps)	Broadhand Service - Uplead Speed (Mbps)	Usage Allowance (GB)	Usage Allewence Action Telen When Limit Reached (select)
-			+						
F									
F									
E									
				See attac					
F									
F									
F			-						
F									
_									

	erating Companies lection Form				FCC Form 481 OM8 Control No. 3060-0986/OM8 Control No. 3060-081 July 2013
	- 200 2 2				
<010>	Study Area Code		401712		
<015>	Study Area Name		HOUNTAIN VIEW 7	E: CO	
<020»	Program Year	W	2016		
4030		USAC should contact regarding this data	Lesile Devey		
<035>	The second district of	nber - Number of person identified in data line <030>	970425):00 ext.		
4339 >	Contact Email Address -	Email Address of person identified in data line <030>	lesite.deveyeye	;cot,com	
<810>	Reporting Carrier	Mountain View Telephone Company			
<811>	Holding Company	Yelcot Holding Group, Inc.			
<812>	Operating Company	Hountain View Telephone Company			
413 >		фÞ	1	φ>	qb
-					
		Affiliates	- 1	SAC	Doing Business As Company or Brand Designation
			 See attach 	ched worksheet	-

T	hel Lands Reporting lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0 July 2013
<010>	Study Area Code	401712
<015>	Study Area Name	HOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Devey
<035>	Contact Telephone Number - Number of person identified in data line <	
<039>	Contact Email Address - Email Address of person Identified in data line <	30> leslie.dewey9yeloot.com
910>	Tribal Land(s) on which ETC Serves	
920>	Tribal Government Engagement Obligation	Name of Attached Document
•		
	ompany serves Tribel lands, please select (Yes,No, NA) for each these boxes	
	m the status described on the attached document(s), on line 920,	Belect
	trates coordination with the Tribel government pursuant to Ke)(9) includes:	Yes at No or
	day's margaret	Not Applicable
921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	
922>	Feasibility and sustainability planning;	
923>	Marketing services in a culturally sensitive manner;	
924>	Compliance with Rights of way processes	
925>	Compliance with Land Use permitting requirements	
926>	Compliance with Facilities Siting rules	
927>	Compliance with Environmental Review processes	
928>	Compliance with Cultural Preservation review processes	

	o Terrestriel Beckhaul Reporting ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	401712	
<015>	Study Area Name	HOUSTAIN VIEW TEL CO	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Loslie Devey	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9764253100 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lesise.dewey@yelcot.com	
	Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).		
c1120>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	
	y.		

Lifeline	erms and Condition for Lifeline Customers		* .	d ¹⁰ a	FCC Form 481 OMB Control No. 3060-0986/CMB Control No. 3060-0819 July 2013
<010>	Study Area Code		401712		
<015>	Study Area Name		HOUNTAIN VI	EK TEL CO	
<020>	Program Year		2016	100 (0	
<030>	Contact Name - Person USAC should contact regarding this data	-Autom	Leelas Deve		
<035>	Contact Telephone Number - Number of person identified in data	line <030>	8704253100		
<039>	Contact Email Address - Email Address of person identified in data		lealis, dewey		
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	ſ	evrc_401712se22	110.pdf	
<1220>	Link to Public Website	нттр			Name of Attached Document
or the we	neck those baxes below to confirm that the attached document(s), on line batte listed, on line 1220, contains the required information pursuant to [a)(2) annual reporting for ETCs receiving low-income support, carriers muraport:				
<1221>	information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	•			
<1222>	Details on the number of minutes provided as part of the plan,				
<1223>	Additional charges for toll calls, and rates for each such plan.				

	ce Cap Carrier Additional Documentation	14	2		FCC Form 481	986/OMB Control No. 3060-0819
			050		July 2013	and compression with propositi
ncluding i	tate-of-Return Carriers officiated with Price Cap Local Exchange Carriers				Ray 2013	
	Study Area Code					
<015>	Study Area Name	4017.2				
	Program Year	PERSONALIN ALLE AND APPLICATION				
	Contact Hame - Person USAC should contact regarding this data	2016				
<035b	Contact Telephone Number - Number of person identified in data line <030>	9704233100 VXL:				
<039>	Contact Email Address - Email Address of person identified in data line <0.30>	TABLIE CHARACTARICOC.	ces			
	Physical Company	el mer i de			and the second of the second	fi a see
	appropriate responses below (Yes, No, Not Applicable) to note compilance as					to offset access charge reduction
Connect A	merica Phase II support as set forth in 47 CFR § \$4.812(b),(c),(d),(e). The inform	mation reported on this for	rm and in the docu	ments attached belo	w is accurate.	
	Incremental Connect America Phase I reporting				1	
<3010>	2nd Year Certification (47 CFR § 54.313(b)(1)i)				1	
<2011a>	3rd Year Certification (47 CFR § 54.313(b)(1)5)					
<2011b>	Attachment (47 CFR § 54.313(b)(1)(1)					
			1		- 1	
			Name of Attache	ed Decument(s) Listing Re	quired information	
	Price Cap Carrier Receiving Frezen Support Certification (47 CFR § 54.312(a)))				
<2012>	2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))					
<2013>	2014 Frozen Support Calculation (47 CFR § \$4.313(c)(2))					
42014	2015 Frozen Support Calculation (47 CFR § 54.313(c)(3))					
<2015>	2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))					
	Price Cap Cerrier Connect America ICC Support (47 CFR § 54.313(d))					
<2016>	Certification Support Used to Build Broadband					
	Connect America Phase II Reporting (47 CFR § 54.313(e))					
<2017>	3rd year Broadband Service Certification			and the second		
<2018	5th year Broadband Service Certification					
<2019>	Interim Progress Certification					
<2020>	Please check the box to confirm that the attached document(s), on life	ne 2021 contains the rec	uired information			
	pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support s	hall provide the number	, names, and	· L		
	addresses of community anchor institutions to which began providing	access to broadband se	rvice in the			
	preceding calendar year.					
<2021>	Interim Progress Community Anchor Institutions					
-ENTER	more in 1Ab des communità santon montante.		1		1	
			1		- 1	
			1		1	
			Name	of Altached Document(s)	Listing Maguined Information	

	ste Of Ratura Cerrier Additional Documentation decises Form		FCC Form 481 OMS Control No. 3060-0866/OMS Control No. 2060-0818
		10.03	July 2013
4010»	Study Area Code	101712	
<015>	Study Area Name	MOUNTAIN VIEW TEL CO	
	Program Year	2016	
	Contact Home - Person USAC should contact regarding this data	Luslie Dewey	
	Contact Telephone Humber - Number of person Identified in deta line <030+ Contact Email Address - Email Address of person Identified in data line <030+	legite dewayfyelcot.com	
	the beausy below to note compliance on its five your service quality place (porsuer	The same of the sa	the product of the state of the state of
CHECK		to to 47 CHE 9 St. 2004013 one, for providing hand correct, essuring to information reported on this form and in the documents attack	
		401712ar3010.pdf	
(3010)	Progress Report on 5 Year Plan	1	1
(mose)	Milestone Certification (47 CFR § 54.31307(130))	1	- 1
		Name of Attached Document Listing Required Inform	Miss
(3011)	Please check the box to confirm that the attached document(s), on line 3 § 54.313 ((X1)(S), the center shall provide the number, names, and addreproviding access to broadband service in the preceding calendar year.	012 contains the required information pursuant to sees of community enchor institutions to which began	
(3012)	Community Anchor Institutions (47 CFR § 54.313(7)(1)(8))		
		Name of Attached Document Litting Required Information	
	Is your company a Privately Held ROR Carrier (47 CFR § 54.3.1.1(1)(2)) If you, does your company file the BUS annual report	(Yes/No) (Yes/No)	38
Plane	check these boxes to confirm that the attached document(s), on line 3017	Constitutes the recognition followed by E. S. 313/PC	2) compliance montage:
	Electronic copy of their annual AUS reports [Operating Report for Telecommunications Secretary)	, or many the residence because of a constraint	团
(3016)	Document(s) for Belance Sheet, Income Statement and Statement of Car	sh Flows	[7]
		401712er3017.pdf	
(3017)	If the response is per on line 3014, attach your company's IUS annual report and all required documentation		1
		Name of Atlantari Comment United Residual Information	
100181	if the response is no on line 3014, is your company audited?	(Yen/No) (\sim
(NAC 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	turnet of	
	If the response is yes on fine 2018, planse check the bown below to confirm your submission, on time 1026 pursuant to § 54.51.5(1)(2), concerns		_
(3015)	Ether a copy of their audited fluencial statement; or (2) a fluencial report in a to	mmat comparable to RUS Operating Report for Telecontinumication	· 🖸
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Co	esh Flows	
(3051)	Management letter and audit opinion issued by the independent certified pu	blic accountant that performed the company's financial audit	
	If the response is no on line 3018, please check the boses below to confirm your submission, on line 3016 pursuant to § 54.31 3(7(2), contains:		
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2] a financial report in a format comparable to RUS Operating Report for Telecommunications		
	Serrowen,		
NATIONAL DESCRIPTION OF THE PARTY OF THE PAR	Underlying information subjected to a review by an independent certified public accountant		=
(3024) (3025)	Underlying information subjected to an efficer certification. Occument(s) for Belance Sheel, Income Statement and Statement of Co.	sh Flows	
(38%)	Attach the worksheet listing required information		
	L		
		Mame of Actached Document Listing Required Information	

REDACTED - FOR PUBLIC INSPECTION

Page 12

(2000) Rate Of Return Corrier Additional Decumentation (Centinued)	-30	(6	-		FCC Form 481
Data Collection Form				0.00	ONCO Control No. 3060-0535/ON/3 Control No. 3060-0519
				42.9	July 2019

4010×	Study Area Code	401712
<035>	Study Area Name	MOUNTAIN VIEW TEL CO
4020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leglin Daway
+035>	Contact Telephane Number - Number of person identified in data line <030>	8704253100 ext.
40395	Contact Email Address - Email Address of person Identified in data line <030>	leslie.dewex8velcet.com

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



	tion - Reporting Carrier ection Form	OA	C Form 481 MB Control No. 3060-0986/OMB Control No. 3060-0819 y 2013
<010>	Study Area Code	401712	
<015>	Study Area Name	MOUNTAIN VIEW TEL CO	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey	
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yelcot.com	1

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support eciplents; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.							
Name of Reporting Carrier: MOUNTAIN VIEW TEL CO							
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/25/2015						
Printed name of Authorized Officer; Anne Schuhknecht							
Title or position of Authorized Officer: Vice President							
Telephone number of Authorized Officer: 8704253100 ext.							
Study Area Code of Reporting Carrier: 401712	Filing Due Date for this form: 07/01/2015						

Certification - Agent / Data Collection Form	ertification - Agent / Carrier ata Collection Form	FCC Form 481 OMB Control No. 3060-0886/OMB Control No. 3060-0819 July 2013
s <0.00	<010> Study Area Code	401712
<015> S	Study Area Name	MOUNTAIN VIEW TEL CO
<020> P	<020> Program Year	2016
0300 C	<030> Contact Name - Person USAC should contact regarding this data	Leslie Dewey
c03\$> C	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
c0395 C	c039> Contact Email Address - Email Address of person identified in data line <030> lesile.dewey8yolcot.com	leslie.dewey@yelcot.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Persons willfully making fabe statements on this form can be punished by fine or forfeiture under the Construnkations Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	Persons willfully making fabe statements on this form car
Filing Due Date for this form:	Study Area Code of Reporting Carrier:
	elephone number of Authorized Officer:
	Rite or position of Authorized Officer:
	Printed name of Authorized Officer:
Dates	Signature of Authorized Officer:
	Name of Reporting Carrier:
	Name of Authorized Agent:
iso certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent, and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	ties sertify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy o agont; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.
is authorized to submit the information reported on behalf of the reporting carrier.	pertify that (Name of Agent)
Certification of Officer to Authorize an Agent to File Annual Reports for CAF or U Recipients on Behalf of Reporting Carrier	Certification of Officer to Auth

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
i, as agent for the reporting carrier, cardify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.
Name of Reporting Carrier:
Name of Authorized Agent or Employee of Agent:
Signature of Authorized Agent or Employee of Agent:
Printed name of Authorized Agent or Employee of Agent:
Title or position of Authorized Agent or Employee of Agent
Telephone number of Authorized Agent or Employee of Agent:
Study Area Code of Reporting Carrier: Filing Due Date for this form:
Persons willfully making fake statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503 bl, or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Attachments

	ce Offerings Including Voice Rate Data Jection Form	FCC Form 481. OMB Control No. 3060-0985/OMB Control No. 1060-0819 Ady 2013
<010>	Study Area Code	401712
<015>	Study Area Name	HOUNTAIN VIEN TEL CC
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslio Devey
<035>	Contact Telephone Number - Number of person identified in data line <030>	\$704253130 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	ieslie,dewey\$yelzot.com

<701> Residential Local Service Charge Effective Date <702> Single State-wide Residential Local Service Charge

1/1/2015

<703>

<41>	4b	ab	41>	<0≥	db	ФФ	45>	
State	Sechange (ILEC) ALL EXCHANGES	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Una Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
AR	ALL EXCHANGES		FR	15.3	0.0	0.0	0.0	15.3
-		_						
_								
			n.v					

(710) Broadband Price Offerings Data Collection Form FCC Form 483 OMB Control No. 3050-0986/GMB Control No. 3060-0819 July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dawsy
<035>	Contact Telephone Humber - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person Identified in data line <030>	leelie.dewey#yelcot.com

αÞ	41>	42>	41>	<d2:< th=""><th>(4)১</th><th></th><th>db</th></d2:<>	(4)১		db
Exchange (UEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		bu cannerie any uses	Control of the Contro	Usage Allowance Action Taken When Limit Reached (select)
ALL	22.95	0.0	22.95	0.512	0.256	193393	Other, n/a
ALL	32.95	0.0	32.95	1.5	0.512	999999	Other, n/a
ALL	39.95	0.0	39.95	3.0	0.768	999999	Other, n/a
ALL	44.95	0.0	44.95	6.0	0.768	399999	Other, n/a
ALL	54.95	0.0	54.95	10.0	0.768	999999	Other, n/a
	-						
	-						
	-						
	 						
	_						
	Exchange (UEC) ALL ALL ALL	Exchange (LEC) Residential Rate ALL 22.95 ALL 32.95 ALL 39.95 ALL 44.95	Exchange (LEC) Residenties State Regulated Fees ALL 22.95 0.0 ALL 32.95 0.0 ALL 39.95 0.0 ALL 39.95 0.0	Exchange (ILEC) Residential Rate State Regulated Fees Total Rates and Fees ALL 22.95 0.0 22.95 ALL 32.95 0.0 32.95 ALL 39.95 0.0 39.95 ALL 44.95 0.0 44.95	Exchange (ILEC) Residential Rate State Regulated Fees Total Rates and Fees Broadband Service Download Speed (Athps) ALL 22.95 0.0 22.95 0.512 ALL 32.95 0.0 32.95 1.5 ALL 39.95 0.0 39.95 3.0 ALL 44.95 0.0 44.95 4.0	Exchange (ILEC) Residenties Rate State Regulated Fees Total Rates and Fees Broadband Service Download Speed (Mbps) Broadband Service Upload Speed (Mbps) ALL 22.95 0.0 22.95 0.512 0.256 ALL 32.95 0.0 32.95 1.5 0.512 ALL 39.95 0.0 39.95 3.0 0.768 ALL 44.95 0.0 44.95 4.0 0.768	Exchange (U.EC) Residential Rate Regulated Fees Total Rates and Fees Broadband Service Download Speed (Mbps) Broadband Service Upload Speed (Mbps) Usage Allowance (GB) ALL 22.95 0.0 22.95 0.512 0.256 999999 ALL 32.95 0.0 32.95 1.5 0.512 999999 ALL 39.95 0.0 39.95 3.0 0.768 999999 ALL 44.95 0.0 44.95 6.0 0.768 999999

800) Op	orating Compenies			FCC Form 481	
Data Col	lection Form	-	1.5	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
<010>	Study Area Code	401712			
<015>	> Study Area Name		W TEL CO		
<020>	5 (
<030>					
<035>	Contact Telephone Number - Number of person identified in data line <0	BOD 8704253100 e	at.		
<039>	Contact Ernail Address - Ernail Address of person identified in data line of	130> leslie.deve	#yelcot.com	· · · · · · · · · · · · · · · · · · ·	
<810>	Reporting Carrier Nountain View Telaphone Company				
<811>	Holding Company Yelcot Holding Group, Inc.				
<812>	Operating Company Keuntain View Telephone Company				
<813> _	ab		SAC	Co35 Doing Business As Company or Brand Designation	
27	Affillates				
	Yelcot Telephone Company, Inc.		401733	YELCOT	
59	Yelcot Video Group, Inc.			YELCOT	
7 -	The second secon				
1.5					
34					
- 3					
- 25					
-					
				· · · · · · · · · · · · · · · · · · ·	
	~~~				

## REDACTED - For Public Inspection

## Mountain View Telephone Company, Inc. (SAC 401712)

ATTACHMENT - Line 112

# FIVE YEAR SERVICE QUALITY IMPROVEMENT PLAN PROGESS REPORT ATTACHMENT REDACTED IN ITS ENTIRETY



Mountain View Telephone Company
481 Line 112 – Five Year Service Quality Improvement Plan PROJI
Study Area: 401712

REDACTED - FOR
PUBLIC INSPECTION

**REDACTED - FOR** 



Mountain View Telephone Company
481 Line 112 – Five Year Service Quality Improvement Plan PRO
REDACTED - FOR
Study Area: 401712

**PUBLIC INSPECTION** 



REDACTED - FOR PUBLIC INSPECTION

Mountain View Telephone Company STUDY AREA 401712	